

OFFICE USE ONLY  
 Log No. 58182  
 Permit No. \_\_\_\_\_  
 Basin 212

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 17569

1. OWNER Las Vegas Sands, Inc. ADDRESS AT WELL LOCATION: 3355 S. Las Vegas Blvd.  
 MAILING ADDRESS 3355 S. Las Vegas Blvd.

2. LOCATION NW 1/4 SW 1/4 Sec. 16 T. 21 N. R. 61 E. Clark County  
 PERMIT NO. NO-2728A 162-16-202-0081  
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE CEC-5  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Asphalt over sand (fill)</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>Sand w/ gravel</u>		<u>3</u>	<u>10</u>	<u>7</u>
<u>caliche</u>		<u>10</u>	<u>12.5</u>	<u>2.5</u>
<u>Silty sand</u>		<u>12.5</u>	<u>15</u>	<u>2.5</u>
<u>Sandy gravel</u>		<u>15</u>	<u>20</u>	<u>5</u>
<u>Clayey sand</u>		<u>20</u>	<u>26</u>	<u>6</u>

8. WELL CONSTRUCTION  
 Depth Drilled 26 Feet Depth Cased 25 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 6 Inches To 26 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2-375</u>	<u>7</u>	<u>218</u>	<u>0</u>	<u>25</u>

Perforations:  
 Type perforation slotted  
 Size perforation .02  
 From 5 feet to 25 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 0-1  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No 1-3 filled with bentonite  
 From 3 feet to 26 feet

9. WATER LEVEL  
 Static water level ~14 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 9/19, 1996  
 Date completed 9/19, 1996

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Don Wilson Contractor  
 Address 731 P. lot rd., suite 6  
Las Vegas, NV 89119  
 Nevada contractor's license number issued by the State Contractor's Board \_\_\_\_\_  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. MT589  
 Signed Don Wilson  
 By, driller performing actual drilling on site or contractor  
 Date 10/11/96